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**DECLARATION AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	20413Y
First Named Inventor	M. NEEPER ET AL.
COMPLETE IF KNOWN	
Application Number	
Filing Date	August 21, 2000
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYNTHETIC HUMAN PAPILLOMAVIRUS GENES

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/150,728	08/25/1999	20413PV
60/210,143	06/07/2000	20413PV2

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorneys or agents with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number OR
☒ Registered practitioner(s) name/registration number listed

Place Customer Number
Bar Code Label here

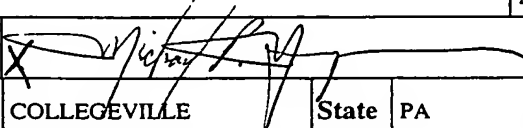
Name	Registration Number	Name	Registration Number
JOANNE M. GIESSER	32,838	JACK L. TRIBBLE	32,636

Direct all correspondence to: ☒ Customer Number or Bar Code Label



Name	JOANNE M. GIESSER				
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Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-3046	Fax	(732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
MICHAEL P		NEEPER			
Inventor's Signature				Date	18 July 2000
Residence: City	COLLEGEVILLE	State	PA	Country	US
				Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000				
City	Rahway	State	NJ	ZIP	07065-0907
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
WILLIAM L.				McCLEMENTS			
Inventor's Signature		<i>William McClements</i>		Date		<i>18 July 2000</i>	
Residence: City		DOYLESTOWN		State PA		Country US	
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City		Rahway		State NJ		ZIP 07065-0907	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
KATHRIN U.				JANSEN			
Inventor's Signature		<i>Kathrin U. Jansen</i>		Date		<i>17 July 2000</i>	
Residence: City		DOYLESTOWN		State PA		Country US	
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City		Rahway		State NJ		ZIP 07065-0907	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
LOREN D.				SCHULTZ			
Inventor's Signature		<i>Loren D. Schultz</i>		Date		<i>18 July 2000</i>	
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Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City		Rahway		State NJ		ZIP 07065-0907	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
LING				CHEN			
Inventor's Signature		<i>Ling Chen</i>		Date		<i>July 26, 2000</i>	
Residence: City		BLUE BELL		State PA		Country US	
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City		Rahway		State NJ		ZIP 07065-0907	

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Supplemental Sheet

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
XIN-MIN				WANG			
Inventor's Signature		X <i>Xin-min Wang</i>			Date		X 7/17/2000
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						Citizenship	CHINA
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City		Rahway		State	NJ	ZIP	07065-0907
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
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Residence: City				State		Country	
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Inventor's Signature					Date		
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City		Rahway		State	NJ	ZIP	07065-0907
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Inventor's Signature					Date		
Residence: City				State		Country	
						Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City		Rahway		State	NJ	ZIP	07065-0907